## INVOICE

Remit to:

Customer Name

2929 M Customer Number

CITY OF CARSON Invoice Number Invoice Date 202847AL 03-04-20 ARDept/BPRO Due Date 05-03-20 SH: CCLE

\$1,900.76

Tax ID

95-6000927

Amount Due

Bill to:

P.O. Box 512816 Los Angeles CA

> CITY OF CARSON ATTN: ACCOUNTS PAYABLE

90051-0816

701 E CARSON ST

LA County Sheriff's Department

First Supervisorial District

CARSON CA 90745

Payment Method: Check Money Order

Revenue Source

Amount Enclosed

9317

Please write Invoice No on front of check or Money Order. DO NOT MAIL CASH

Please check if address has changed. Write correct address on back of stub and attach with payment

Please detach the above stub and return with your remittance payable to LA County Sheriff's Department



## Sheriff ORIGINAL

Servic	e From	Service To	Unit	Unit Name	•	Customer	Numbe	er	Invoice Number	•	Invoice Date
01-01-20		01-31-20	75766	Carson Station-Contract Cities		508690			202847AL		03-04-20
Invoice Charges											
Ref Line No.	Servic Code	e ş	Service		Description	Liah	o Ins	Actual Service Units	Unit Price	c	Charges/Credit
1	337	Helicopt	ter Svc -	Hrly (CC)	HELICOPTER SERVIC FOR JANUARY 2020.			-			\$1,712.40
2					11% LIABILITY INSURANCE						\$188.36
									Subtotal		\$1,900.76

Other Charges	
Description	Charges
TOTAL OTHER Charges	

Credit Payments Applied \$0.00 \$1,900.76 Total Amount Due By 05-03-20

Please include your invoice number on all payments. MAKE CHECK PAYABLE TO: LOS ANGELES COUNTY SHERIFF'S DEPARTMENT P.O. Box 512816, Los Angeles, CA 90051-0816. Direct Inquiries to: 211 W. Femple St, 6th floor, Los Angeles, CA 90012 (213) 229-3324

Alice Liu yaliu@lasd.org 213->29-3348 05/04/>0